PART B -FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

04/16/2009

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

> Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must

> > Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United

States Postal Service with sufficient postage for first class mail in an envelope

addressed to the Mail Ston ISSUE FEE address above or being facsimile

have its own certificate of mailing or transmission.

or Fax (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the mailed to the mailed to the current correspondence address; as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

				transmitted to	the USPTO (571) 273-2885,	on the date indicated below.
						(Depositor's name
						(Signature
						(Date
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET	
10/521,059	12/23/2004		Yoshino	ri WARIISHI	TOW-082US	7003
TITLE OF INVENTIO	N: SOLID POLYM	IER CELL ASS	EMBLY			
APPLN. TYPE	SMALL ENTITY	ISSUE	FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
Non-Provisional	no	\$1,510.00		\$300.00	\$1,816.00	07/16/2009
EXAN	ART UNIT CLA		CLASS-SUBCLASS]		
T. H. I	arsons	179	95		_	
1. Change of correspondence address or indication of "Fee Address" of TeR 1.85). Change of correspondence address (or Change of Correspondence Address from PTO/SB12) attached. "Fee Address" indication (or "Fee Address" Indication from PTO/SB47; Rev 03-02 or more recent) attached. Use of a Castomer Yunber is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attemps or agents OR, afternatively, (2) the name of a single firm thaving as a member a registered attemps or agent) and the names of up to 2 registered patent attemps or agents. If no name will be printed. 3 thio Action 1. Labive & Cockfield, LLP (1) thinks of the page of			
PLEASE NOTE: Uni for recordation as set (A) NAME OF ASSIG	ess an assignee is identif forth in 37 CFR 3.11. Co NEE	ied below, no a	ssignee data s form is NO	will appear on the patent. If T a substitute for filing an a B) RESIDENCE: (CITY and	an assignee is identified be ssignment.	low, the document has been filed
Honda Giken Kogye				Tokyo, Japan	_	
Please check the appropria	te assignee category or categ	gories (will not be	printed on the	patent): Individual	X Corporation or other pri	ivate group entity Government
4a. The following fee(s) are enclosed:		4b.	Payment of Fee(s):		
x Issue Fee			A ch	eck in the amount of the fee	(s) is enclosed.	
x Publication Fee	(No small entity discour	at permitted)	Payn	nent by credit card. Form P1	O-2038 is attached.	
X Advance Order	-# of Copies	2		Director is hereby authorize osit Account Number	d by charge the required fee 12-0080	e(s), or credit any overpayment, to
person and	atus (from status indicat ims SMALL ENTITY st		R 1.27.	b. Applicant is no longe	er claiming SMALL ENTIT	Y status. See 37 CFR 1.27(g)(2).
OTE: The Issue Fee and		ed) will not be a	ccepted from	(if any) or to re-apply any pro anyone other than the applica		application identified above, gent; or the assignce or other party in
Authorized Signature /Anthony A			A. Laurentano	o/	Date	June 23, 2009
Typed or printed na	me	Anthony A	A. Laurentano	0	Registration No.	38,220

00959

7590

Boston, Massachusetts 02109-2127

LAHIVE & COCKFIELD, LLP

One Post Office Square